

TRANSPORTATION ENHANCEMENT PROJECT APPLICATION

Date: _____

Applicant/LPA: _____

Contact Person: _____
(Technical/Administrative, i.e. LPA Official, City Engineer, Public Works Director, etc.)

Address: _____

Telephone Number: _____

Email Address: _____

Project Description: _____

| Projected Project Costs: | FEDERAL SHARE* 80% of Total Project Cost | LPA SHARE 20% Local Fund Match | TOTAL |
|---------------------------------|-----------------------------------------------------------|---------------------------------------------|--------------|
| | \$ | \$ | \$ |

*Maximum Federal Share = 80% of Total Cost

**LPA
Official
Signature:** _____
(Mayor, Pres. Board, or Agency Head)

Title: _____

